

TTO COMPLIANCE CERTIFICATION STATEMENT

FORM 2

TTO Certification Statement for the operation located at

Alaskan Copper Works - 6th Ave.
3200 6th Avenue S.
Seattle, WA 98134

Permit No. 7238-02

Based on my inquiry of the person or persons directly responsible for managing compliance with the permit limitation or pretreatment standard for total toxic organics (TTO), I certify that to the best of my knowledge and belief, no dumping of concentrated toxic organics into the wastewaters has occurred since filing of the last discharge monitoring report. I further certify that this facility is implementing the toxic organic management plan submitted to the permitting (or control) authority.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that a qualified personnel properly gathers and evaluates the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

(PLEASE COMPLETE SECTION 1 OR 2 BELOW)

1. The toxic organic management plan for the facility is the same as that submitted as part of the "90-Day Report" or subsequent correspondence with King County.

NAME: James Brown TITLE: Operations Mgr.

SIGNATURE: James Brown DATE: 12/06/04

Principal Executive/Authorized Agent
(please circle one)

2. The toxic organic management plan for the facility is attached.

NAME: _____ TITLE: _____

SIGNATURE: _____ DATE: _____

Principal Executive/Authorized Agent
(please circle one)

Please return this form to: King County Industrial Waste
130 Nickerson Street, Suite 200
Seattle, WA 98109-1658

TTO COMPLIANCE CERTIFICATION STATEMENT

FORM 2

TTO Certification Statement for the operation located at

Alaskan Copper Works - Marginal Way
3600 East Marginal Way
Seattle, WA 98134

Permit No. 7201-02

Based on my inquiry of the person or persons directly responsible for managing compliance with the permit limitation or pretreatment standard for total toxic organics (TTO), I certify that to the best of my knowledge and belief, no dumping of concentrated toxic organics into the wastewaters has occurred since filing of the last discharge monitoring report. I further certify that this facility is implementing the toxic organic management plan submitted to the permitting (or control) authority.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that a qualified personnel properly gathers and evaluates the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

(PLEASE COMPLETE SECTION 1 OR 2 BELOW)

1. The toxic organic management plan for the facility is the same as that submitted as part of the "90-Day Report" or subsequent correspondence with King County.

NAME: James C Brown TITLE: Operations Mgr.

SIGNATURE: James Brown DATE: 12/06/04

Principal Executive/Authorized Agent
(please circle one)

2. The toxic organic management plan for the facility is attached.

NAME: _____ TITLE: _____

SIGNATURE: _____ DATE: _____

Principal Executive/Authorized Agent
(please circle one)

Please return this form to: King County Industrial Waste
130 Nickerson Street, Suite 200
Seattle, WA 98109-1658



Industrial Waste Monthly Self-Monitoring Report

Mail or FAX to: King County Industrial Waste
130 Nickerson Street, Suite 200
Seattle, WA 98109-1658
Phone 206-263-3000 / FAX 206-263-3001

Company Name: ALASKAN COPPER WORKS

Sample Site No.: A-4009 Permit/DA No.: 7201

Please Specify Month & Year: Month NOVEMBER 2004

This form is available at <http://dnr.metrokc.gov/wlri/indwaste>

All units are mg/l unless otherwise noted. Note: For cyanide circle test performed - amenable or total ▼

Sample Date (circle)	Sample Type CC (Composite) G (grab) BC (batch)	pH		Cadmium, Cd	Chromium, Cr	Copper, Cu	Lead, Pb	Mercury, Hg	Nickel, Ni	Silver, Ag	Zinc, Zn	Cyanide (CN) Amenable (A) or Total (T)	NP Fats, Oils, and Grease (Average of 3 grabs)	Flow (GPD) Industrial	Notes (Indicate Batch Discharges)
		Min	Max												
1															
2															
3															
4															
5															
6															
7															
8															
9															
10															
11															
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27															
28															
29															
30															
31															

Monthly Min pH & Date

Monthly Max pH & Date

Total Monthly Flow (gallons)

Maximum Daily Flow & Date

NOT IN USE THIS MONTH

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. I further certify that all data requiring a laboratory analysis were analyzed by a Washington State Department of Ecology accredited laboratory for each parameter tested.

James Brown 12/10/04
Signature of Principal Executive or Authorized Agent Date

PLEASE CIRCLE ALL PERMIT VIOLATIONS

Due Date: Monthly report is due by the 15th of each month.



Industrial Waste Monthly Self-Monitoring Report

Mail or FAX to: King County Industrial Waste
130 Nickerson Street, Suite 200
Seattle, WA 98109-1658
Phone 206-263-3000 / FAX 206-263-3001

Company Name: ALASKAN COPPER WORKS Sample Site No. A-4010 Permit/DA No.: 7201

Please Specify Month & Year: Month NOVEMBER 2004

This form is available at <http://dnr.metrokc.gov/wlr/indwaste>

All units are mg/l unless otherwise noted. Note: For cyanide circle test performed - amenable or total ▼

Sample Date (circle)	Sample Type C (Composite) G (grab) BC (batch)	pH		Cadmium, Cd	Chromium, Cr	Copper, Cu	Lead, Pb	Mercury, Hg	Nickel, Ni	Silver, Ag	Zinc, Zn	Cyanide (CN) Amenable (A) or Total (T)	NP Fats, Oils, and Grease (Average of 3 grabs)	Flow (GPD) Industrial	Notes (Indicate Batch Discharges)
		Min	Max												
1		9.8	10.1											1074	
2		9.8	10.4											2476	
3		10.1	10.3											1507	
(4)	C	9.9	10.0		.49	.47			.36		.05			1763	
5		9.9	10.3											2003	
6		-----	-----											-----	
7		-----	-----											-----	
8		9.8	9.9											1238	
9		9.7	10.5											1373	
10		10.0	10.3											1403	
(11)	C	9.9	10.1		.59	.82			.75		.05			1436	
12		10.0	10.4											1191	
13		-----	-----											-----	
14		-----	-----											-----	
15		9.8	10.2											2800	
16		9.9	10.2											1845	
17		9.7	9.9											1715	
(18)	G	9.6	9.8		.37	.35			.37		.05			1947	
19		9.6	10.4											1376	
20		-----	-----											-----	
21		-----	-----											-----	
22		10.1	10.7											1770	
23		10.0	10.5											2098	
(24)	C	9.8	10.0		.49	.33			.40		.05			1518	
25		-----	-----											-----	
26		-----	-----											-----	
27		-----	-----											-----	
28		-----	-----											-----	
29		9.4	9.6											1802	
30		9.2	9.5											2224	
31		-----	-----											-----	

Monthly Min pH 9.2 & Date 11-30-04
Monthly Max pH 10.7 & Date 11-22-04

Total Monthly Flow (gallons) 34559
Maximum Daily Flow 2800

& Date 11-15

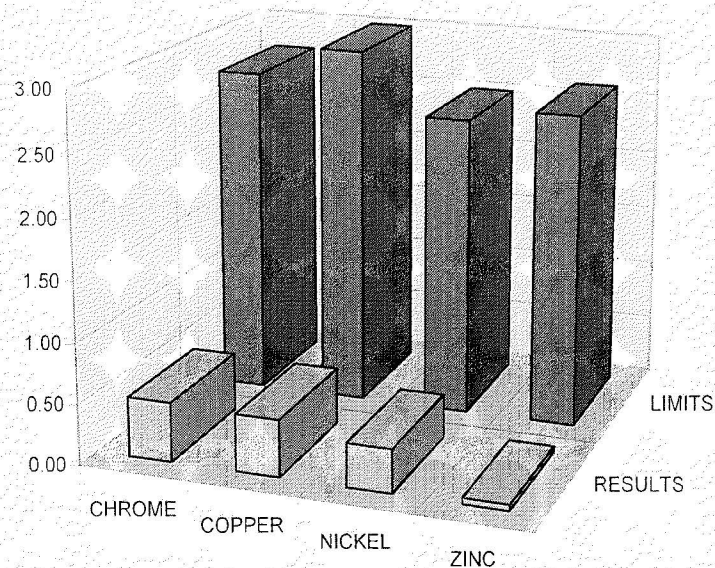
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. I further certify that all data requiring a laboratory analysis were analyzed by a Washington State Department of Ecology accredited laboratory for each parameter tested.

James J. Brown
Signature of Principal Executive or Authorized Agent
Date 12/10/04

PLEASE CIRCLE ALL PERMIT VIOLATIONS

Due Date: Monthly report is due by the 15th of each month.

**NOVEMBER
METRO LIMITS**

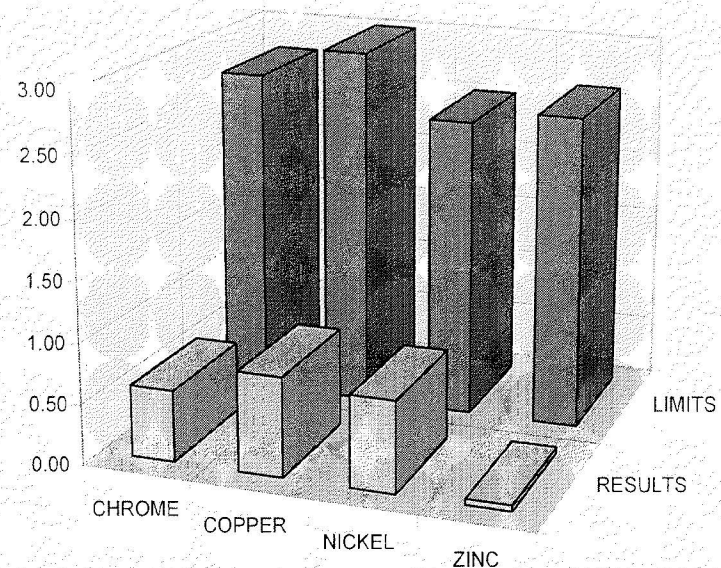


ALASKAN COPPER WORKS

3200 FACILITY

NOVEMBER 4, 2004

COMPOSITE M105225



ALASKAN COPPER WORKS

3200 FACILITY

NOVEMBER 11, 2004

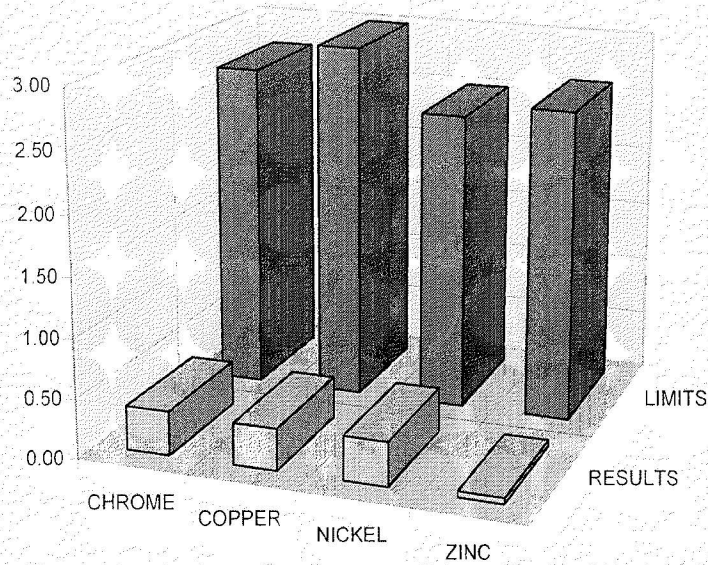
COMPOSITE M105280

VISUAL REPRESENTATION OF THE LAB RESULTS

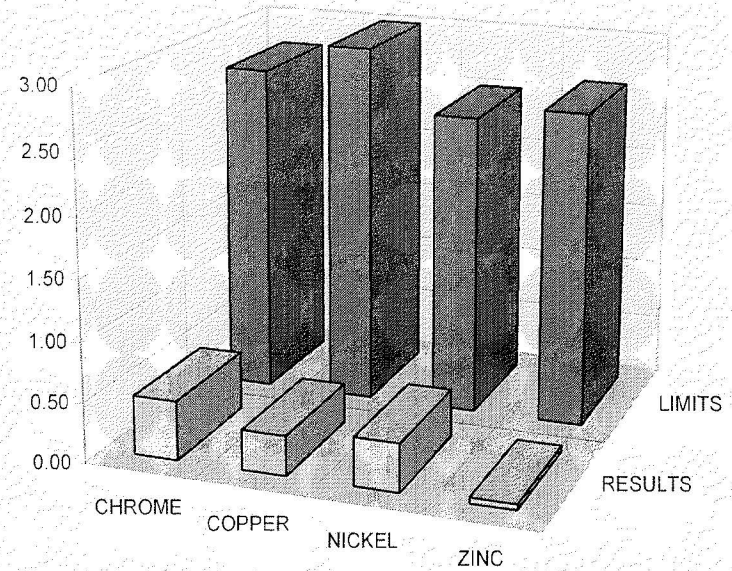
	CHROME	COPPER	NICKEL	ZINC
RESULTS	0.49	0.47	0.36	0.05
LIMITS	2.75	3.00	2.50	2.61

	CHROME	COPPER	NICKEL	ZINC
RESULTS	0.59	0.82	0.75	0.05
LIMITS	2.75	3.00	2.50	2.61

**NOVEMBER
METRO LIMITS**



ALASKAN COPPER WORKS
3200 FACILITY
NOVEMBER 18, 2004
GRAB M94693



ALASKAN COPPER WORKS
3200 FACILITY
NOVEMBER 24, 2004
COMPOSITE M94723

VISUAL REPRESENTATION OF THE LAB RESULTS

	CHROME	COPPER	NICKEL	ZINC
RESULTS	0.37	0.35	0.37	0.05
LIMITS	2.75	3.00	2.50	2.61

	CHROME	COPPER	NICKEL	ZINC
RESULTS	0.49	0.33	0.40	0.05
LIMITS	2.75	3.00	2.50	2.61